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PTO/SB/21 (09-06)
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TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number 10/820,530 - Conf. #8326 Filing Date April 7, 2004 First Named Inventor **Dennis BENJAMIN** Art Unit 1618 **Examiner Name** M. J. Perreira Attorney Docket Number PPI-144

ENCLOSURES (Check all that apply)						
X Fee Trans	mittal Form	Drawing(s)	After Allowance Communication to TC			
Fee	Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences			
x Amendme	nt/Reply	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
Afte	r Final	Petition to Convert to a Provisional Application	Proprietary Information			
Affid	lavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter			
X Extension of Time Request		Terminal Disclaimer	X Other Enclosure(s) (please Identify below):			
Express Abandonment Request		Request for Refund	Appendices A-C Return Receipt Postcard			
Information Disclosure Statement		CD, Number of CD(s)				
Certified Copy of Priority Document(s)		Landscape Table on CD				
Reply to Missing Parts/ Incomplete Application		Remarks				
Reply to Missing Parts under						
Firm Name	SIGNAT	URE OF APPLICANT, ATTORNEY, OF	RAGENT			
Firm Name	LAHIVE & COCKFYELD, LYP					
Signature	ture					
Printed name	Maria Laccotripe Zacharakis, Ph.D., J.D.					
Date	April 13, 2007	Reg. No.	56,266			

Express Mail Label No. EV 956465177 US Dated: April 13, 2007

PTO/SB/17 (02-07)

Approved for use through 02/28/2007. OMB 0651-0032

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Effective on 12/08/2004.

Complete if Known

FEE TRANSMITTAL FOR FY 2007 X Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1618 Art Unit	Fffec	tive on 12/08/2004.		1					
FILING FEELS Small Entity Application Type Fee (\$) Fee	Fees pursuant to the Consolid	dated Appropriatio	ns Act, 2005 (H.R.	4818).	Application Num	nber	10/820,530 - C	onf. #832	6
Examiner Name X Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1618	FEE TRANSMITTAL					April 7, 2004			
X Application Interest Application A				First Named Inv	*****	· · · · · · · · · · · · · · · · · · ·			
METHOD OF PAYMENT (check all that apply)	101112001			Examiner Name	aminer Name M. J. Perreira				
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing for standard fee(s) or underpayments of Charge fee(s) indicated below, except for the filing for standard fee(s) indicated below Charge fee(s) indicated below, except for the filing for standard fee(s) indicated below, except for the filing for standard fee(s) indicated below, except for the filing for standard fee(s) indicated below, except for the filing for standard fee(s) indicated below, except for the filing for standard fee(s) indicated below, except for the filing for standard fee(s) indicated below, except for the filing for standard fee(s) indicated below, except for the filing for standard fee(s) indicated below, except for the filing fee(s) indicated below, except for the	X Applicant claims sm	all entity status. S	See 37 CFR 1.27		Art Unit 1618				
Check Credit Card Money Order None Other (please identify): x Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing if a county of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee 13: Fee 13	TOTAL AMOUNT OF PAYMENT (\$) 510.00 Attorney Docket No. PPI-144								
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SUBMITTED BY						
Signature	Low	Registration No. (Attorney/Agent)	56,266	Telephone	(617) 227-7400	
Name (Print/Type)	Pe) Maria Laccotripe Zacharakis, Ph.D., J.D.				April 13, 2007	
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